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**FEC** FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

2010 OCT 21 AM 11: 09

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**FEC FORM 3X** 

Rev. 12/2004

Office Use Only TYPE OR PRINT ▼ Example: If typing, type NAME OF 12FE4M5 COMMITTEE (in full) over the lines. 1C, A, M, P, A, I, G, N, , F, O, R, , A, M, E, R, I, C, A, N, , V, A, L, U, E, S, , P, A, C, S.H. I.R.L.I .N.G.T.P. R, D #,9,3,0 12,8,0,0, ADDRESS (number and street) Check if different than previously ιΫ,Αι  $N_1G_1T_1O_1N$ reported. (ACC) STATE A ZIP CODE CITY A FEC IDENTIFICATION NUMBER ▼ 3. IS THIS NEW **AMENDED** 8 X OR REPORT (N) (A) TYPE OF REPORT (b) Monthly Nov 20 (M11) Aug 20 (M8) Feb 20 (M2) May 20 (M5) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Jun 20 (M6) Mar 20 (M3) Sep 20 (M9) (a) Quarterly Reparts: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report (Q1) (c) 12-Day Primary (12P) X General (12B) Runoff (12B) **PRE-Election** Quarterly Report (Q2) Report for the: Convention (12C) Special (12S) October 15 Quarterly Report (Q3) in the January 31 Election on State of Year-End Report (YE) July 31 Mid-Year (d) 30-Day Report (Non-election **POST-Election** Runoff (30R) General (30G) Special (30S) Year Only) (MY) Report for the: Termination Report in the (TER) Election on State of 20 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. DORIE Type or Print Name of Treasurer Signature of Treasurer NOTE: Submission of false, arroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. Office

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